## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

HAMPT-1

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			23				ſ	RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2 3 minus 20=		• 3			X\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			ا minus 3 =		*			X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	**	OR	+270≐	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	844
CLAIMS AS AMENDED - PART II								CMALLS		•	OTHER	
(Column 1)				(Colu	mn 2) HEST	(Column 3)	) <b>r</b>	SMALL		OR	SMALL	
ENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus	***	T CL AINA	= -		X40=		OR	X80=	
┞	FIRST PHESE	INTATION OF M	OLITPLE DE	PENDEN	I CLAIN			+135=		OR	+270=	
								TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE		10	ADDIT. FEE	•
<del> </del>	r	(Column 1) CLAIMS			mn 2) HEST	(Column 3)	i ,					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	+	Minus			= .		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AUA	=		X40=		OR	X80=	
┞	FINST PRESE	NTATION OF M	OLTIFLE DEF	בווו כב טבו בווטבווו				+135=		OR	+270=	
	(Column 1) (Column 2) (Column 3)									OR	TOTAL ADDIT. FEE	
NT C	. 1	CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
DME	Total	*	Minus	**	TON	=		X\$ 9=	FEE_	00	X\$18=	FEE
AMENDMENT	Independent	*	Minus	***		=	╽┟	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDEN		T CLAIM	CLAIM		∧4U= ————————————————————————————————————		OR	∧o∪≃	
* If the entry in column 1 is less than the entry in column 2, write "0" in action 2.								+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **OR TOTAL ADDIT. FEE ADDIT. FEE												
	The "Highest Nur	nber Previously Pa	aid For" (Total o	r Independ	dent) is the	highest numbe	er fou	nd in the app	propriate bo	x in col	umn 1.	